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CONFIRMATION NO. 8759

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|--|---|-------------------------------|---|--|--------------------------------|
| SERIAL NUMBER 10/601,723 | FILING OR 371(c) DATE 06/23/2003 RULE | CLASS 607 | GROUP ART UNIT 3762 | ATTORNEY DOCKET NO. A279-USA | |
| APPLICANTS David L. Canfield, Lake Hughes, CA; Kate E. Purnell, Valencia, CA; | | | | | |
| ** CONTINUING DATA ***** | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/28/2003 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature Initials | | STATE OR COUNTRY CA | SHEETS DRAWING 4 | TOTAL CLAIMS 23 | INDEPENDENT CLAIMS 2 |
| ADDRESS 24677 | | | | | |
| TITLE Housing for an implantable medical device | | | | | |
| FILING FEE RECEIVED 904 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |